

Appl. No. 10/807,974
Dated: June 21, 2010
Reply to Office action of April 2, 2010

AMENDMENTS TO THE SPECIFICATION

Please replace the paragraph beginning on page 5, line 1 of the Specification as-filed with the following replacement paragraph (which includes markings to show changes made):

The duckbill seal of the zero seal may comprise of opposing lip portions separated by a slit portion. In this aspect, the opposing lip portions are coated with or attached to a soft or occlusive material. The occlusive material is one of ~~Kraton~~ KRATON®, polyurethane or the like. It is appreciated that the occlusive lip portions allow a surgical item such as a suture to extend through the slit portion without disrupting the seal.

Please replace the paragraph beginning on page 24, line 16 of the Specification as-filed with the following replacement paragraph (which includes markings to show changes made):

Referring to FIGS. 34, 35, duckbill valves 124, 120 are seen according to the present invention comprising opposing lip portions 126, 127 separated by slit portions 130. In this embodiment, the opposing lip portions 126, 127 are coated with or attached to a very soft and occlusive material 125. A material for the attached occlusive portions 125 may include silicone, ~~Kraton~~ KRATON®, Polyurethane or the like. The soft, occlusive portions 125 of the opposing lips 126, 127 of the duckbill seals 120, 124 allow the duckbill seals to form a complete seal while an object is within the sealing portions of the duckbill. Normally, duckbill seals only seal when there is no

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object extending through the sealing lip portions or slits 130. With the occlusive sealing lip portions 126, 127 of the invention, a user may extend selected items through the seal without disrupting the seal. For instance, FIG. 36 illustrates that a surgeon may be able to tie a suture knot extra corporeally without losing internal gas pressure during a laparoscopic surgery where the present invention is used as an access device. The suture extensions 500, 501 may extend through the duckbill seal 120 so that they can be tied and subsequently pushed into place through the access device 100. The occlusive material 125 associated with the slits 130 in the duckbill valve 120 allows the valve to close fully even while certain items 500, 501 remain in the fluid path of the valve 120.

Please replace the paragraph in the section entitled "Abstract of the Disclosure" with the following replacement paragraph (which includes markings to show changes made):

The present invention relates to a surgical access device comprising an elongate tubular member having a working channel and ~~an axis extending between a proximal end and a distal end~~, a septum seal integrally formed at the distal end of the tubular member, and a zero seal disposed at the distal end of the tubular member and distal to the septum seal, the zero seal being sized and configured to seal when no instrument is in place within the working channel of the tubular member, and the zero seal being coupled to the septum seal ~~and having properties to float with the septum seal relative~~

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~~to the tubular member. The tubular member may be formed from an elastomeric material. The tubular member has a wall that may be rigid or semi-rigid, and the tubular member may be reinforced with a coil along a portion of the tubular member. The tubular member may include a distal, mechanically deployable shielding portion. The zero seal may be a duckbill seal constructed with one or more intersecting sealing portions. The duckbill seal may comprise of having opposing lip portions separated by a slit portion. The opposing lip portions are coated with or attached to a soft or occlusive material. The occlusive material is one of Kraton, polyurethane or the like. The occlusive lip portions allow a surgical item such as a suture to extend through the slit portion without disrupting the seal. In one aspect, the tubular member and the septum seal are molded together as a single unit and the zero seal is then bonded or fused to the septum seal. In another aspect, the tubular member, the septum seal and the zero seal are all molded together or integrally formed as a single unit. The tubular member may further comprise flexibility enhancing features to allow the tubular member to flex in response to a motion of a surgical instrument within the working channel of the tubular member.~~